

County: Outagamie
 PARKSIDE CARE CENTER
 1201 GARFIELD AVENUE

Facility ID: 7070

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LITTLE CHUTE 54140 Phone: (920) 788-5806
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 76
 Total Licensed Bed Capacity (12/31/01): 97
 Number of Residents on 12/31/01: 73

Ownership: Limited Liability Company
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 71

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		35.6
Supp. Home Care-Personal Care	No					1 - 4 Years		49.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.5	More Than 4 Years		15.1
Day Services	No	Mental Illness (Org./Psy)	19.2	65 - 74	9.6			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	41.1			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.5		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	24.7	65 & Over	94.5	-----		
Transportation	No	Cerebrovascular	8.2		-----	RNs		4.8
Referral Service	No	Diabetes	8.2	Sex	%	LPNs		6.2
Other Services	No	Respiratory	5.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	28.8	Male	37.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	63.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Skilled Care	8	100.0	237	45	88.2	105	0	0.0	0	0.0	13	0	0.0	0	0.0	0	66	90.4
Intermediate	---	---	---	6	11.8	88	0	0.0	0	0.0	1	0	0.0	0	0.0	0	7	9.6
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
Total	8	100.0		51	100.0		0	0.0	14	100.0		0	0.0	0	0.0		73	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	18.2	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	6.8	60.3	32.9	73
Other Nursing Homes	0.0	Dressing	11.0	64.4	24.7	73
Acute Care Hospitals	79.5	Transferring	20.5	53.4	26.0	73
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	19.2	41.1	39.7	73
Rehabilitation Hospitals	0.0	Eating	75.3	17.8	6.8	73
Other Locations	2.3	*****				
Total Number of Admissions	88	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	2.7	Receiving Respiratory Care		5.5
Private Home/No Home Health	41.0	Occ/Freq. Incontinent of Bladder	13.7	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	13.7	Receiving Suctioning		1.4
Other Nursing Homes	9.6			Receiving Ostomy Care		0.0
Acute Care Hospitals	12.0	Mobility		Receiving Tube Feeding		4.1
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	4.1	Receiving Mechanically Altered Diets		26.0
Rehabilitation Hospitals	0.0					
Other Locations	3.6	Skin Care		Other Resident Characteristics		
Deaths	33.7	With Pressure Sores	9.6	Have Advance Directives		50.7
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	83			Receiving Psychoactive Drugs		38.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities % Ratio				
Occupancy Rate: Average Daily Census/Licensed Beds	72.1	82.7	0.87	85.1	0.85	84.3	0.86	84.6	0.85
Current Residents from In-County	100	82.1	1.22	80.0	1.25	82.7	1.21	77.0	1.30
Admissions from In-County, Still Residing	29.5	18.6	1.59	20.9	1.41	21.6	1.37	20.8	1.42
Admissions/Average Daily Census	123.9	178.7	0.69	144.6	0.86	137.9	0.90	128.9	0.96
Discharges/Average Daily Census	116.9	179.9	0.65	144.8	0.81	139.0	0.84	130.0	0.90
Discharges To Private Residence/Average Daily Census	47.9	76.7	0.62	60.4	0.79	55.2	0.87	52.8	0.91
Residents Receiving Skilled Care	90.4	93.6	0.97	90.5	1.00	91.8	0.98	85.3	1.06
Residents Aged 65 and Older	94.5	93.4	1.01	94.7	1.00	92.5	1.02	87.5	1.08
Title 19 (Medicaid) Funded Residents	69.9	63.4	1.10	58.0	1.20	64.3	1.09	68.7	1.02
Private Pay Funded Residents	19.2	23.0	0.83	32.0	0.60	25.6	0.75	22.0	0.87
Developmentally Disabled Residents	0.0	0.7	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	19.2	30.1	0.64	33.8	0.57	37.4	0.51	33.8	0.57
General Medical Service Residents	28.8	23.3	1.23	18.3	1.57	21.2	1.36	19.4	1.48
Impaired ADL (Mean)	50.1	48.6	1.03	48.1	1.04	49.6	1.01	49.3	1.02
Psychological Problems	38.4	50.3	0.76	51.0	0.75	54.1	0.71	51.9	0.74
Nursing Care Required (Mean)	5.8	6.2	0.94	6.0	0.96	6.5	0.89	7.3	0.79